IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| Applicant: | FUJIWARA, et al. | Examiner: | G. Kaur |
|-------------|------------------|-----------------|---------|
| Serial No.: | 10/578275 | Group Art Unit: | 1795 |

Filed: May 5, 2006 Docket: 10873.1774USWO

Title: METHOD OF MEASURING BLOOD COMPONENT, SENSOR USED

IN THE METHOD, AND MEASURING DEVICE

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper is being transmitted by EFS Web to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 8, 2010.

INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

With regard to the above-identified application, the items of information listed on the enclosed Form SB08 are brought to the attention of the Examiner. Copies of any foreign patent documents or "Other Documents" are enclosed.

A concise explanation of the relevance of each non-English language document or other information is a follows (37 C.F.R. §(a)(3)):

A full English translation has been included for JP 11-118794. A machine translation has been included for JP 2001-318071. US 5,385,846 corresponds to JP 3267933.

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed (CHECK ONE):

| (CI | (CHECK ONE): | | | | |
|-------------|---|--|--|--|--|
| \boxtimes | (1) within three (3) months of the Filing Date, before the mailing date of a First Office Action on the merits, or before the mailing date of a First Office Action on the merits after the filing of a request for continued examination under 37 C.F.R. §1.114; or | | | | |
| | (2) after the period defined in (1) but before the mailing date of a Final Rejection or Notice of Allowance, and | | | | |
| | the requisite Statement is below, OR | | | | |

the requisite fee of \$180.00 under Rule 1.17(p) is included herein, or

| (3) after the mailing date of a Final Rejection or Notice of Allowance but on or before the payment of the Issue Fee, AND the requisite Statement is below AND the requisite fee of \$180.00 under Rule 1.17(p) is included herein. | | | | | |
|--|--|--|--|--|--|
| STATEMENT | | | | | |
| Applicants hereby state that: | | | | | |
| Each item of information contained in the Information Disclosure Statement was first cited in a communication from a foreign patent office in a counterpart application or by the USPTO in a related application not more than three months prior to the filing date of the Information Disclosure Statement | | | | | |
| If this box is checked, Applicant provides the following: | | | | | |
| Certification Under 37 C.F.R. §1.704(d) | | | | | |

In accordance with 37 C.F.R. §1.704(d), the undersigned hereby certifies that each item listed on the enclosed Form SB08 was first cited in a communication from a foreign patent office in a counterpart application, and that this communication was not received by any individual designated in 37 C.F.R. §1.56(c) more than thirty (30) days prior to the filling of this Information Disclosure Statement.

☐ The Examiner is hereby advised of the following co-pending U.S. applications. As these applications have been published copies of each U.S. patent application is not enclosed.

| Publication No. | Application No. | Filing Date | Group |
|-----------------|-----------------|-----------------|-------|
| US 2007/0138026 | 10/598,001 | August 15, 2006 | 1795 |
| US 2007/0062822 | 10/578,988 | May 11, 2006 | 1795 |

No representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§ 102 and 103 and Applicants reserve the right, pursuant to 37 C.F.R. § 1.131 or otherwise, to establish that the reference(s) are not "prior art." Moreover, Applicants do not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Form SB08, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

FEE AUTHORIZATION

Please charge any required fee or credit overpayment to Deposit Account No. 50-3478.

Respectfully submitted,

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Dated: March 8, 2010

DPM/pjk

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